L	PATENT	APPLI	CATION FE	E DETERMIN	ATION RE	ection of into	rmation unt	ess it disp	Ough 7/31/200 DEPARTMEN Bays a valid O	IT OF COMA	
				FOIR P 10-873				مبيد	ation or Docke	i Mumber	
 	CLA		FILED - PAI	RT I (Column 2)	. •	. 5444.		<u> </u>	OTL	JED TIME	
FOR		Manage en en			<u> </u>	SMALL ENTITY			OR OTHER THAN SMALL ENTITY		
BASIC FEE (37 CFR 1.16(a)) TOTAL CLAIMS		MU MU		MUNBER EXTR	<u>`</u>	RATE FEE			RATE	FEE	
(37 CFR 1.16	(d)					!		OR		1	
INDEPENDENT CLAIMS			minus 20 e					OR	X 1 .	+	
	PENDENT CLAIM		minus 3 :		<u> ^ : -</u>	:		OR	x s :	 	
					[.,_			OR		 	
" ure calleten	ice in column 1 is	less than	zero, enler "O" in	column 2	70	TAL		Ĺ	· · · ·	 	
- 4.1	CLAIMS A	S AMEN	IDED - PART	r n				OR	TOTAL	L	
8 116/10) _ (Solumn			•	ŕ						
	CLAIM		(Catur	_ , , , , , , , , , , , , , , , , , , ,	3) SA	ALL ENTI	ry .	OR	OTHER	THAN	
Ž	REMAIN	NG	HIGHE	FR PRESENT	.			_	SMALL	ENTITY	
Votat	AMENDME	NT	PREVIOU PAID F	JSIY FYTO	RAT	- 1 ~	DDI. DNAL		RATE	ADDI:	
(1) CFR 1.1Q		Mi	nus "	5 1:0-	┨┠╼╌	- F	EE .			TIONAL	
Independent (37 CFR 1,160	" 1	Mi	nus	21.0	1 1 25		. 1.	or X	.50.	7	
FIRST PRES	ENTAZION DE LI		<u> </u>		x 1/00	2 -			, 200.	<u> </u>	
	ENTATION OF MUL	IMPLE DEP	ENDENT CLAIM (37 CFR 1.16(d))	1.180)_	7.		: au.	_(')_	
					TOTAL	' -	°		360.		
	(Column 1)		(Cat.		ADD'L FE	E	。	R AD	TAL D'L FEE		
	CLAIMS REMAINING	T	(Column HIGHEST					•			
	AFTER	1	NUMBER PREVIOUS	PRESENT Y EXTRA	RATE	ADD					
Total	AMENDMENT	Minus	PAID FOR			TIOIU		- '	RATE	ADDI- TIONAL	
Independent	 				x 1 75 .		\dashv	-		FEE .	
(37 CFR 1.16(b))	<u> </u>	Minus	1				OR	X 34	<u>50 = </u>		
FIRST PRESENT	TATION OF MULTIP	LE DEPEN	DENI CLAIM (32	CFR') (Sten	× \$ 100=		OR	1. 52	200		
				J. 7. 10(0))	+:/BO=		OR	1.5	20.		
•					TOTAL ADO'L FEE	1	OR	TOTA	VL -		
	(Column 1)		(Column 2)	(Column 3)		*		ADD	L FEE		
1	REMAINING		HIGHEST NUMBER	PRESENT		T	7		<u> </u>		
Tali	AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA	RATE	ADDI- TIONAL	1	RA	TE A	DOI-	
Total CFR 1.18(c))		Minus	**	-		FEE	1	L	Tic	ONAL EE	
CFR 1,16(b))		Minus	•••	-	x <u>s 25</u> =		OR	x : 5		==	
ST PRESENTAT	ION OF MULTIPLE	TERE: OF	45.00	1	x : 100=		OR	x 5 72	~		
	Ctirle	APERIOE!	II CLAIM (37 CF)	R 1.16(d))	+ 1/80=		OR	+ 36			

The Trighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fite (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEHD FEES OR COMPLETED FORMS TO THIS

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.